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**CONFIRMATION NO. 4770**

SERIAL NUMBER 10/649,130	FILING DATE 08/27/2003  RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 13192-115DIV
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## APPLICANTS

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 09/818,596 03/27/2001 PAT 6,645,946

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 0	TOTAL CLAIMS 3	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

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## TITLE

Delivery of a therapeutic agent in a formulation for reduced toxicity

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )